

Application Data Sheet

Application Information

Application number:: Unassigned
Filing Date:: Herewith
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R??:
Number of CD disks::
Number of copies of CDs::
Sequence Submission::
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: ELECTROSTATIC VALVES FOR
MICROFLUIDIC DEVICES
Attorney Docket Number:: 020174-002910US
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 4
Small Entity?:: Yes
Latin name::
Variety denomination name::
Petition included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers One::
Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: B. Scott
Middle Name::
Family Name:: Driggs
Name Suffix::
City of Residence:: Bossier City
State or Province of Residence::
Country of Residence::
Street of Mailing Address:: 1235 Whitehall Place
City of Mailing Address:: Bossier City
State or Province of mailing address::
Country of mailing address::
Postal or Zip Code of mailing address:: 71112

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Germany
Status:: Full Capacity
Given Name:: Markus
Middle Name:: M.
Family Name:: Enzelberger
Name Suffix::
City of Residence:: Esslingen
State or Province of Residence::
Country of Residence:: Germany
Street of Mailing Address:: Hindenburgstr. 194
City of Mailing Address:: Esslingen
State or Province of mailing address::
Country of mailing address:: Germany
Postal or Zip Code of mailing address:: 73730

Applicant Authority Type:: Inventor

Patent Application

Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Stephen
Middle Name:: R.
Family Name:: Quake
Name Suffix::
City of Residence:: San Marino
State or Province of Residence::
Country of Residence::
Street of Mailing Address:: 744 Plymouth Road
City of Mailing Address:: San Marino
State or Province of mailing address::
Country of mailing address::
Postal or Zip Code of mailing address:: 91108

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/246,469	11/06/00

Foreign Priority Information

Country::	Application number::	Filing Date::
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Assignee Information

Assignee Name::
Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

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